| 10 ELECTION CYCLE REPOR | RT OF RECE | cal Cardidat PAS ANUDIS Judicias Elec | BURSEMEN | DE | AUG 3 0 2018 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------|---------------------------------------|------------------------|---------------------------------|
| Name of Candidate MICHA | EL A. BOL | AND | | | ampaign Finance |
| Address 2030 400 | BRANDON, M | 5 39043 | County RANK | EJ LS | DATESTAMP |
| Telephone Work 601-825-9 | 1505 Hon | ne G01-829- | 3863 Fax <u>6</u> | 01-825 | 5-0171 |
| Contact Name MILHAGE A | BOLAND | Email Add | ress mile bo | 0.00 | aclanyers.com |
| Office Sought CIZCHIT I | MAGE: DIS | TRICK 20 | PLACE ! | | * |
| Check here if above is dif | ferent from previous r | port | 8 | | |
| May 10, 2010 Periodic Re | nort / lenuen/ 1 20 | 10 through April 3 | n 2010) | | Mandatory |
| June 10, 2010 Periodic Re | , | | | | • |
| July 9, 2010 Periodic Rep | | _ | | | |
| October 10, 2009 Periodic | | | | | |
| October 26, 2010 Pre-Elec | | | | | |
| November 16, 2010 Pre-R | unoff Report (Octo | ober 24, 2010, thro | ugh November 13, | 2010) | Runoff Candidates |
| campaign expenditures and campaign expenditures and campaign expenditures are manda shall submit a report indicating | itory, even if no com | IMPORTANT | ditures have occurre | bligations d. In such | case, the candidate |
| (2) Until a Candidate files a Termin Ann. § 23-16-807 (b) (ii) and (iii) | ation Report, annua | | | | |
| (3) The receiving authority must be falls on a weekend or a holiday, day before the deadline. Faxed | e in actual receipt of , the office must be | in actual receipt of | | | |
| R | EPORTED CON | ITRIBUTIONS A | ND DISBURSEN | MENTS | Calendar |
| 1.00 | Itemized + Non- | itemized = | This Period | | Year-To-Date |
| Total amount of contributions | 5 8-15 | 8 5 | 0 | \$ | 0 |
| Total amount of disbursem ents | \$ +\$ | \$ | D | \$ | 100.00 |
| Total amount of cash on hand | | \$ | | | |
| Signature of Candidate Authority: Refer to Miss. Code Ann. \$23-15 Penades: Failure to submit required report result in fines of \$50 per day analyte report | -801 (1972) et. seq. for s | datutory requirements. | Date Date Its statutory dead innea. | or failure to : | 0 |
| passing in three cit soo per day arender prosect SEAD TO: 1. Concession for Statements, State original art 1920s or few to 801-855-1600 or 825-575-5018. 2. Contribution for countyleside and count | ries, musti-county and all hy | | | | volon, F. C. Blex FIR, Jackson, |